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CONFIRMATION NO. 2184

SERIAL NUMBER 10/775,974	FILING DATE 02/09/2004 RULE	CLASS 702	GROUP ART UNIT 2863	ATTORNEY DOCKET NO. NWISP049					
APPLICANTS Adnan Khaleel, Austin, TX; <i>tl</i>									
** CONTINUING DATA ***** <i>tl</i>									
** FOREIGN APPLICATIONS ***** <i>tl</i>									
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 05/07/2004									
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:40%; border-bottom: 1px solid black;"> Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged </td> <td style="width:15%; border-bottom: 1px solid black; text-align: center;"> STATE OR COUNTRY TX </td> <td style="width:10%; border-bottom: 1px solid black; text-align: center;"> SHEETS DRAWING 15 </td> <td style="width:10%; border-bottom: 1px solid black; text-align: center;"> TOTAL CLAIMS 46 </td> <td style="width:25%; border-bottom: 1px solid black; text-align: center;"> INDEPENDENT CLAIMS 4 </td> </tr> </table>					Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged	STATE OR COUNTRY TX	SHEETS DRAWING 15	TOTAL CLAIMS 46	INDEPENDENT CLAIMS 4
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ADDRESS 022434 BEYER WEAVER & THOMAS LLP P.O. BOX 70250 OAKLAND , CA 94612-0250									
TITLE Histogram performance counters for use in transaction latency analysis									
FILING FEE RECEIVED 1324	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:								
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%; border: 1px solid black; padding: 2px;"> <input type="checkbox"/> All Fees </td> </tr> <tr> <td style="border: 1px solid black; padding: 2px;"> <input type="checkbox"/> 1.16 Fees (Filing) </td> </tr> <tr> <td style="border: 1px solid black; padding: 2px;"> <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) </td> </tr> <tr> <td style="border: 1px solid black; padding: 2px;"> <input type="checkbox"/> 1.18 Fees (Issue) </td> </tr> <tr> <td style="border: 1px solid black; padding: 2px;"> <input type="checkbox"/> Other _____ </td> </tr> </table>					<input type="checkbox"/> All Fees	<input type="checkbox"/> 1.16 Fees (Filing)	<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)	<input type="checkbox"/> 1.18 Fees (Issue)	<input type="checkbox"/> Other _____
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